

FORM JC/OH  
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00021113		2 PAGE # 1 of 43	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Charles F.		MI
	NICKNAME Charlie		LAST Baird		SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE
	4909 Interlachen Lane Austin, TX 78747				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		FIRST Charles F.		MI
	NICKNAME Charlie		LAST Baird		SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
	4909 Interlachen Lane Austin, TX 78747				
7 CAMPAIGN TREASURER PHONE	AREA CODE		PHONE NUMBER		EXTENSION
(512) 233-4955					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month    Day    Year		Month    Day    Year		
02/26/2006		THROUGH 06/30/2006			
10 ELECTION	ELECTION DATE Month    Day    Year		ELECTION TYPE		
	11/07/2006		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) District Judge District 299		
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..				
	Name				
	Address/PO Box;    Apt. / Suite #;    City;    State;    Zip Code				
<input type="checkbox"/> additional pages					

Electronic Filing Version

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Baird, Charles F. (Mr.)

15 ACCOUNT # (Ethics Commission filers)  
0002111316 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION  
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

430.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

13,280.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

501.34

4. TOTAL POLITICAL EXPENDITURES

\$

20,949.30

CONTRIBUTION  
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

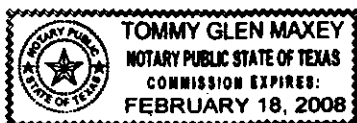
608.98

OUTSTANDING  
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

0.00

## 18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Charles F. Baird*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Charles Baird, this the 14 day  
of July, 2006, to certify which, witness my hand and seal of office.

*Tommy Glen Maxey*

Signature of officer administering oath

Glen Maxey

Print name of officer administering oath

Notary

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/32 Report: 3/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  03/06/2006	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC(ID# 00011114) AFL-CIO Publi Employees Organized to Promote Legislative Equality  6 Contributor address; City; State; Zip Code 1625 L St. N.W. Washington, DC 20036	7 Amount of contribution (\$)  \$500.00
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8 Contributor's principal occupation

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  03/06/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Beall, Jonathan  6 Contributor address; City; State; Zip Code 4795 Meadow Wood Lane #300 Chantilly, VA 20151	7 Amount of contribution (\$)  \$100.00
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8 Contributor's principal occupation  
Retired9 Contributor's job title  
Retired10 Contributor's employer/law firm  
Retired

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

## **SCHEDULE A (J)**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/32 Report: 4/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  04/25/2006	5 Full name of contributor Blackwell, Betty <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$250.00
6 Contributor address: City: State: Zip Code 1306 Nueces St. Austin, TX 78701		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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4 Date  05/12/2006	5 Full name of contributor BMcPAC <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$1,000.00
6 Contributor address: City: State: Zip Code 111 Congress Ave #1400 Austin, TX 78701		

8 Contributor's principal occupation	9 Contributor's job title
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/32 Report: 5/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  04/06/2006	5 Full name of contributor Burnham, Anne <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$150.00
6 Contributor address; City; State; Zip Code 1202 South Alamo San Antonio, TX 78210		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
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13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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4 Date  03/04/2006	5 Full name of contributor Carmona, Edward M. <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 1301 S. IH 35 #304 Austin, TX 78741		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
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13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/32 Report: 6/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  03/06/2006	5 Full name of contributor CWA-COPE <input checked="" type="checkbox"/> out-of-state PAC(ID# C00002089 )	7 Amount of contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 501 3rd St NW Washington, DC 20001		

8 Contributor's principal occupation	9 Contributor's job title
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10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)
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12 If contributor is a child, law firm of parent(s) (if any)
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13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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4 Date  02/27/2006	5 Full name of contributor DRIVE Committee <input checked="" type="checkbox"/> out-of-state PAC(ID# C00032979 )	7 Amount of contribution (\$)  \$2,500.00
6 Contributor address; City; State; Zip Code 25 Louisiana Ave NW Washington, DC 20001-2198		

8 Contributor's principal occupation	9 Contributor's job title
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10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)
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12 If contributor is a child, law firm of parent(s) (if any)
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13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/32 Report: 7/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
000211134 Date  
04/27/20065 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Fitzgerald & Meissner, P.C.7 Amount of  
contribution (\$)6 Contributor address; City; State; Zip Code  
812 San Antonio #101  
Austin, TX 78701-2224

\$500.00

8 Contributor's principal occupation  
Attorneys9 Contributor's job title  
Attorneys10 Contributor's employer/law firm  
Attorneys

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and  
complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  
03/07/20065 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Gillespie, Tim7 Amount of  
contribution (\$)6 Contributor address; City; State; Zip Code  
10603 Zeus Cove  
Austin, TX 78759

\$100.00

8 Contributor's principal occupation  
Banker9 Contributor's job title  
Banker10 Contributor's employer/law firm  
Capital One

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and  
complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/32 Report: 8/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  05/04/2006	5 Full name of contributor Goodman, Erik S <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$250.00
6 Contributor address; City; State; Zip Code 1012 Rio Grande Austin, TX 78701		

8 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  03/01/2006	5 Full name of contributor Granger & Mueller, P.C. <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 605 W. 10th St. Austin, TX 78701-2042		

8 Contributor's principal occupation  
Attorneys9 Contributor's job title  
Attorneys10 Contributor's employer/law firm  
Attorneys

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/32 Report: 9/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  05/02/2006	5 Full name of contributor Grizzard, Leon J. <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$150.00
6 Contributor address; City; State; Zip Code 1012 Rio Grande Austin, TX 78701		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
--

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
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15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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4 Date  03/02/2006	5 Full name of contributor Hendler, Scott <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$250.00
6 Contributor address; City; State; Zip Code 1300 Alta Vista Avenue Austin, TX 78704		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any) The Hendler Law Firm

12 If contributor is a child, law firm of parent(s) (if any)
--

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/32 Report: 10/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  05/03/2006	5 Full name of contributor Inglis, Ian <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$250.00
6 Contributor address; City; State; Zip Code 1012 Rio Grande Austin, TX 78701		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
10 Contributor's employer/law firm Self	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
--

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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4 Date  05/03/2006	5 Full name of contributor Kuhn, Doyle & Kuhn <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code 603 West 8th St. Austin, TX 78701		

8 Contributor's principal occupation Attorneys	9 Contributor's job title Attorneys
10 Contributor's employer/law firm Attorneys	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
--

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/32 Report: 11/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  05/02/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Law Office of Frank Bryan	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 106 East 6th St. #900 Austin, TX 78701		

8 Contributor's principal occupation Attorneys	9 Contributor's job title Attorneys
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10 Contributor's employer/law firm Attorneys	11 Law firm of contributor's spouse (if any)
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12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
----------------------------	----------------------

4 Date  05/05/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Law Office of Travis Williamson	7 Amount of contribution (\$)  \$1,500.00
6 Contributor address; City; State; Zip Code 3808 South 1st St. Austin, TX 78704		

8 Contributor's principal occupation Attorneys	9 Contributor's job title Attorneys
---	--

10 Contributor's employer/law firm Attorneys	11 Law firm of contributor's spouse (if any)
---	--

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/32 Report: 12/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  03/06/2006	5 Full name of contributor Maldonado, Ricardo <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 4609 Sliverstone Dr. Austin, TX 78744		

8 Contributor's principal occupation

9 Contributor's job title

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  03/02/2006	5 Full name of contributor Martinez, Leonard <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 812 San Antonio #101 Austin, TX 78701		

8 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

## **SCHEDULE A (J)**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/32 Report: 13/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  05/19/2006	5 Full name of contributor McCool, Melanie <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$150.00
6 Contributor address; City; State; Zip Code 4106 Creek Ledge Austin, TX 78731-4638		

8 Contributor's principal occupation  
Attorney

9 Contributor's job title  
Attorney

10 Contributor's employer/law firm  
Fulbright and Jaworski

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  04/25/2006	5 Full name of contributor McCrimmon, Mark <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 704 West 9th St. Austin, TX 78701		

8 Contributor's principal occupation  
Attorney

9 Contributor's job title  
Attorney

10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/32 Report: 14/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  04/27/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Minton, Burton, Foster & Collins	7 Amount of contribution (\$)  \$1,500.00
6 Contributor address; City; State; Zip Code 1100 Guadalupe St. Austin, TX 78701		

8 Contributor's principal occupation Attorneys	9 Contributor's job title Attorneys
10 Contributor's employer/law firm Attorneys	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
--

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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4 Date  02/27/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mirabal, M. Blas	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 4322 Oxhill Drive Spring, TX 77388		

8 Contributor's principal occupation Retired	9 Contributor's job title Retired
10 Contributor's employer/law firm Retired	11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)
--

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)
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16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
----------------------------	----------------------

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 13/32 Report: 15/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  03/01/2006	5 Full name of contributor Nuckols, Tom <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 2309 Farnsworth Circle Austin, TX 78704-4519		

8 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Travis County Attorney

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  06/02/2006	5 Full name of contributor Pitts, Stephen <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 12343 Hunters Chase Dr. #313 Austin, TX 78729		

8 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/32 Report: 16/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  02/27/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ray, Wood & Bonilla L.L.P.	7 Amount of contribution (\$)  \$500.00
6 Contributor address; City; State; Zip Code P.O. Box 165001 Austin, TX 78716		

8 Contributor's principal occupation Attorneys	9 Contributor's job title Attorneys
---	--

10 Contributor's employer/law firm Attorneys	11 Law firm of contributor's spouse (if any)
---	--

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
------------------------------	-------------------	--------------------------------	-----------------

20 Means of transportation	21 Purpose of travel
----------------------------	----------------------

4 Date  03/06/2006	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reed, Richard	7 Amount of contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 11614 Anatole Court Austin, TX 78748-2820		

8 Contributor's principal occupation Attorney	9 Contributor's job title Attorney
--	---------------------------------------

10 Contributor's employer/law firm Travis County District Attorney	11 Law firm of contributor's spouse (if any)
---	--

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.	14 In-kind description (if applicable)
--	--

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location	17 Departure date	18 Destination city / location	19 Arrival date
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20 Means of transportation	21 Purpose of travel
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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 15/32 Report: 17/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
000211134 Date  
02/28/20065 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Sablatura, Russ7 Amount of  
contribution (\$)  
\$250.006 Contributor address; City; State; Zip Code  
13809 Research Blvd. #510  
Austin, TX 787508 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and  
complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  
03/06/20065 Full name of contributor ☐ out-of-state PAC(ID# \_\_\_\_\_)  
Shelton, Polk7 Amount of  
contribution (\$)  
\$100.006 Contributor address; City; State; Zip Code  
600 Little Oak Drive  
Austin, TX 78753-21208 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and  
complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 16/32 Report: 18/43

2 FILER NAME Baird, Charles F. (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00021113

4 Date  02/27/2006	5 Full name of contributor Wehnes, Antonio <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$200.00
6 Contributor address; City; State; Zip Code 1602 W. 7th St. Austin, TX 78702-3326		

8 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

4 Date  02/28/2006	5 Full name of contributor Williams, Jeremiah D. <input type="checkbox"/> out-of-state PAC(ID# _____)	7 Amount of contribution (\$)  \$250.00
6 Contributor address; City; State; Zip Code 13809 Research Blvd. #510 Austin, TX 78750		

8 Contributor's principal occupation  
Attorney9 Contributor's job title  
Attorney10 Contributor's employer/law firm  
Self

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

13 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 15-21. Otherwise, complete box 14 if applicable.

14 In-kind description (if applicable)

15 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

16 Departure city / location

17 Departure date

18 Destination city / location

19 Arrival date

20 Means of transportation

21 Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #

Schedule: 1/8 Report: 19/43

**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00021113

**4** Date

05/01/2006

**5** Payee name  
Atkins, Jesse**6** Payee address; City; State; Zip Code  
5700 Cameron Rd. #234  
Austin, TX 78723**7** Amount  
(\$)

\$245.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
blockwalking☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*

Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

05/05/2006

**5** Payee name  
Austin Chronicle**6** Payee address; City; State; Zip Code  
P.O. Box 49066  
Austin, TX 78765**7** Amount  
(\$)

\$237.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
ad extra cost☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*

Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #

Schedule: 2/8 Report: 20/43

**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00021113

**4** Date

05/01/2006

**5** Payee name

Butts, David

**7** Amount

(\$)

\$2,000.00

**6** Payee address; City; State; Zip Code1914 Patton Lane  
Austin, TX 78723**8** Purpose of payment  
(See instructions regarding type of information required.)  
political consultation☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*

Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/06/2006

**5** Payee name

Ignite Consulting

**7** Amount

(\$)

\$2,998.70

**6** Payee address; City; State; Zip Code4032 South Lamar #146  
Austin, TX 78704**8** Purpose of payment  
(See instructions regarding type of information required.)  
automated telephone calls☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*

Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 3/8 Report: 21/43**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00021113**4** Date

03/01/2006

**5** Payee name  
Kolstad, Laura**6** Payee address; City; State; Zip Code  
1708 Teaberry Drive  
Austin, TX 78745**7** Amount  
(\$)

\$500.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
political consultation☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/17/2006

**5** Payee name  
Kolstad, Laura**6** Payee address; City; State; Zip Code  
1708 Teaberry Drive  
Austin, TX 78745**7** Amount  
(\$)

\$1,000.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
political consultation☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #

Schedule: 4/8 Report: 22/43

**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00021113**4** Date

05/17/2006

**5** Payee name  
Maxey, Glen**6** Payee address; City; State; Zip Code  
P.O.Box 2505  
Austin, TX 78768**7** Amount  
(\$)

\$250.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
political consultation☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*

Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/17/2006

**5** Payee name  
Niche Pubs**6** Payee address; City; State; Zip Code  
P.O. Box 190  
Lockport, IL 60441**7** Amount  
(\$)

\$275.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Austin Lawyer Ad☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*

Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 5/8 Report: 23/43**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00021113**4** Date

03/07/2006

**5** Payee name  
Opal Divine's**6** Payee address; City; State; Zip Code  
700 W 6th St  
Austin, TX 78701**7** Amount  
(\$)

\$634.58

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Election Night Event☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/07/2006

**5** Payee name  
Opinion Analysts Inc**6** Payee address; City; State; Zip Code  
906 Rio Grande  
Austin, TX 78701**7** Amount  
(\$)

\$517.31

**8** Purpose of payment  
(See instructions regarding type of information required.)  
selec telephone numbers☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 6/8 Report: 24/43

**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)

00021113

**4** Date

03/01/2006

**5** Payee name  
Rindy Miller Media**6** Payee address; City; State; Zip Code  
2401 E 6th Street Ste 1003  
Austin, TX 78702**7** Amount  
(\$)

\$1,500.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
TV ads☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/01/2006

**5** Payee name  
Rindy Miller Media**6** Payee address; City; State; Zip Code  
2401 E 6th Street Ste 1003  
Austin, TX 78702**7** Amount  
(\$)

\$1,695.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
TV ads☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:

Baird, Charles F. (Mr.)

Office sought:

Office held: District Judge

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 7/8 Report: 25/43**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00021113**4** Date  
  
03/01/2006**5** Payee name  
Rindy Miller Media**6** Payee address; City; State; Zip Code  
2401 E 6th Street Ste 1003  
Austin, TX 78702**7** Amount  
(\$)  
  
\$2,030.00**8** Purpose of payment  
(See instructions regarding type of information required.)  
TV ads☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date  
  
06/10/2006**5** Payee name  
Travis County Coordinated Campaign**6** Payee address; City; State; Zip Code  
1311-B East 6th St  
Austin, TX 78702**7** Amount  
(\$)  
  
\$5,000.00**8** Purpose of payment  
(See instructions regarding type of information required.)  
coordinated campaign expenses☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 8/8 Report: 26/43**2** FILER NAME Baird, Charles F. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00021113**4** Date

03/03/2006

**5** Payee name  
US Postal Service**6** Payee address; City; State; Zip Code  
Downtown Station  
Austin, TX 78701**7** Amount  
(\$)

\$360.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
postage☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

04/24/2006

**5** Payee name  
US Postal Service**6** Payee address; City; State; Zip Code  
Manchaca Station  
Manchaca, TX 78652**7** Amount  
(\$)

\$78.00

**8** Purpose of payment  
(See instructions regarding type of information required.)  
postage☐ Payment for travel outside Texas (complete boxes 10-16)**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:  
Baird, Charles F. (Mr.)Office sought:  
Office held: District Judge**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 1/1 Report: 27/43

**2** FILER NAME Baird, Charles F. (Mr.)

**3** ACCOUNT #

(Ethics Commission filers)

00021113

**4** Date

03/13/2006

**5** Payee name  
Baird, Charles (Mr.)

**6** Payee address; City; State; Zip Code  
4909 Interlachen Lane  
Austin, TX 78747-1460

**7** Amount  
(\$)

\$127.37

☒ Reimbursement from  
political contributions  
intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
reimbursement of funds

☐ Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel

**4** Date

03/13/2006

**5** Payee name  
Baird, Charles (Mr.)

**6** Payee address; City; State; Zip Code  
4909 Interlachen Lane  
Austin, TX 78747-1460

**7** Amount  
(\$)

\$1,000.00

☒ Reimbursement from  
political contributions  
intended

**8** Purpose of expenditure  
(See instructions regarding type of information required.)  
reimbursement of funds

☐ Payment for travel outside Texas (complete boxes 9-15)

**9** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

**10** Departure city / location

**11** Departure date

**12** Destination city / location

**13** Arrival date

**14** Means of transportation

**15** Purpose of travel